

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
TO	TAL CLAIMS		(Column 1)		(Column 2)		]	TYPE		OR	SMALL	
TOTAL CLAIMS			· · · · · · · · · · · · · · · · · · ·					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			(2) minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			$\Im$ , minus 3 =		*			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	i	TOTAL		OR	TOTAL	325
	C					OTHER	THAN					
		(Column 1)	(Column 2)			(Column 3)		SMALL	NTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus			=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
							L	TOTAL			TOTAL	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE		On	ADDIT. FEE	
		(Column 1)	1		mn 2) HEST	(Column 3)	1 r		ADDI	1 1		ADDI
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	] [	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J			OIT		
								+135=		OR	+270=	
A								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	$\rfloor \rfloor$	X\$ 9=		OR	X\$18=	ï
AME	Independent	*.	Minus	***	T 61 A 114	=		X40=	7	OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA						┙╽	+135=		OR	+270=	
		mn 1 is less than t					l	TOTAL			TOTAL	
**	If the "Highest Nu	imber Previously P imber Previously F nber Previously Pa	aid For" IN TH	IS SPACE	is less tha	an 3, enter "3."	•	ADDIT. FEE	propriate bo	OR x in co	ADDIT. FEE	

PTO/SB/06 (8-96)
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## Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Carter-001/Div OTHER THAN CLAIMS AS FILED - PART I SMALL ENTITY OR SMALL ENTITY (Column 2) (Column 1) FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE **BASIC FEE** \$355 OR (37 CFR 1.16(a)) TOTAL CLAIMS 12 minus 20 = x \$9.00 0 OR (37 CFR 1.16(c)) INDEPENDENT CLAIMS minus 3 = 2 OR 0 0 (37 CFR 1.16(b)) 0 MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR = \$355.00<sub>OR</sub> TOTAL TOTAL \* If the difference in column 1 is less then zero, enter "0" in column 2 OTHER THAN **CLAIMS AS AMENDED - PART II** SMALL ENTITY OR **SMALL ENTITY** (Column I) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING **NUMBER PRESENT RATE** TIONAL RATE TIONAL AFTER **PREVIOUSLY EXTRA** -FEE FEE AMENDMENT PAID FOR OR Total Minus (37 CFR 1.16(c)) OR AMA Independent \*\*\* Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column I) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-;11; REMAINING NUMBER **PRESENT** RATE TIONAL TIONAL **RATE AFTER PREVIOUSLY EXTRA** FEE FEE **AMENDMENT** PAID FOR OR Total Minus (37 CFR 1.16(c)) OR Independent Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADDIT, FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS HIGHEST** ADDI-ADDI-REMAINING **PRESENT** NUMBER RATE **TIONAL** RATE **TIONAL AFTER PREVIOUSLY EXTRA** $\geq$ **FEE** FEE AMENDMENT PAID FOR OR Total (37 CFR 1.16(c)) Minus = ٠s OR Independent Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTA TOTAL OR ADDIT. FEE ADDIT. FEE

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete the light vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

<sup>\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".